

## SUPPLEMENT B

### Preschool or Daycare

*Complete only if child is under 5 and not in public school.*

Name of Child's Preschool/Childcare: \_\_\_\_\_

Length of time having attended this facility: \_\_\_\_\_

My child . . . *(Mark with X only if statement is true or mostly true.)*

\_\_\_\_\_ dislikes preschool/daycare or the present one. **(Circle)**

\_\_\_\_\_ has had the following number of daycares or family home care facilities: life: \_\_\_\_\_

\_\_\_\_\_ misses many days from preschool/daycare.

\_\_\_\_\_ has transportation problems.

\_\_\_\_\_ is not potty-trained.

\_\_\_\_\_ is difficult for the teacher or care worker to manage.

\_\_\_\_\_ often interrupts the teacher/classmates.

\_\_\_\_\_ has trouble following classroom or daycare rules.

\_\_\_\_\_ often doesn't play with other children or bothers teases or pokes, etc.).

\_\_\_\_\_ seems more active than the other children.

\_\_\_\_\_ has trouble sitting and listening during story or circle time.

\_\_\_\_\_ is not liked by the other children.

\_\_\_\_\_ needs testing.

If your child has had some of these problems, about how long ago did they start? \_\_\_\_\_

How much stress is your child under at preschool/daycare? **(circle)**

(little 1, 2, 3, 4, 5 much).

\_\_\_\_\_ How many children per adult are in the preschool or daycare?

\_\_\_\_\_ Are there others outside the family who provide care?

\_\_\_\_\_ The child care provider or teacher doesn't seem to care about our family issues.